



PTO/SB/01 (08-03)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

MLI-10

First Named Inventor

Michael Ries, et al.

COMPLETE IF KNOWN

Application Number

10/763,314

Filing Date

01/22/2004

Art Unit

3738

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Femoral Hip Prosthesis and Method of Implantation

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

01/22/2004

as United States Application Number or PCT International

Application Number

10/763,314

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒ Customer Number: OR ☐ Correspondence address below

Name

Daniel F. Justin

Address

180 South 600 West

City

Logan

State

Utah

ZIP

84321

Country

USA

Telephone

435-753-7675

Fax

435-753-7698

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Michael

Family Name

or Surname Ries

Inventor's
Signature

Date

6/15/04

Residence: City

Tiburon

State

CA

Country

USA

Citizenship

USA

Mailing Address

115 St. Thomas Way

City

Tiburon

State

CA

ZIP

94920

Country

USA

NAME OF SECOND INVENTOR:☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

T. Wade

Family Name

or Surname Fallin

Inventor's
Signature

Date

May 17, 2004

Residence: City

Hyde Park

State

Utah

Country

USA

Citizenship

USA

Mailing Address

210 East 200 South

City

Hyde Park

State

Utah

ZIP

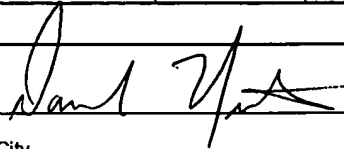

84318

Country

USA

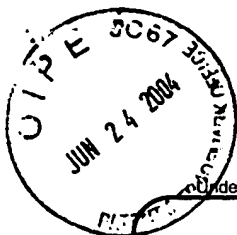
Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Daniel F.		Justin	
Inventor's Signature 		Date <u>MAY 17, 2004</u>	
Logan Residence: City	Utah State	USA Country	USA Citizenship
185 North Winding Way Mailing Address			
Mailing Address			
Logan City	Utah State	84321 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mark A.		Munt	
Inventor's Signature 		Date <u>2/25/04</u>	
Moab Residence: City	Utah State	USA Country	USA Citizenship
619 McCormick Mailing Address			
Mailing Address			
Moab City	Utah State	84532 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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PTO/SB/81 (09-03)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/763,314
Filing Date	01/22/2004
First Named Inventor	Michael Ries, et al.
Title	Femoral Hip Prosthesis and Met
Art Unit	3738
Examiner Name	
Attorney Docket Number	MLI-10

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Daniel F. Justin	50144
David Meibos	45885

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Daniel F. Justin				
Address	180 South				
Address	600 West				
City	Logan	State	Utah	Zip	84321
Country	USA				
Telephone	435-753-7675	Fax	435-753-7698		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

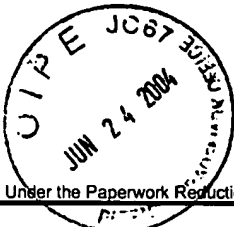
Name	Daniel F. Justin		
Signature			
Date	MAY 17, 2004	Telephone	435-753-7675

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 of 4 forms are submitted.

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Address 600 West

City Logan State Utah Zip 84321

Country USA

Telephone 435-753-7675 Fax 435-753-7698

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SIGNATURE of Applicant or Assignee of Record

Name T. Wade Fallin

Signature

Date

MAY 17, 2004

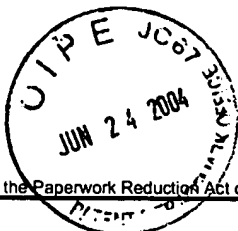
Telephone 435-753-7675

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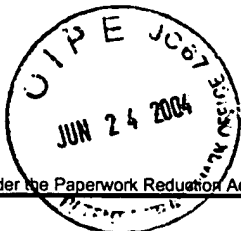
Name	Mark A. Munt
Signature	
Date	6/21/04
Telephone	435-259-6203

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☒ *Total of 4 of 4 forms are submitted.

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OR

<input checked="" type="checkbox"/>	Firm or Individual Name	Daniel F. Justin					
	Address	180 South					
	Address	600 West					
	City	Logan	State	Utah	Zip	84321	
	Country	USA					
	Telephone	435-753-7675	Fax	435-753-7698			

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Michael Ries		
Signature			
Date	6/15/04	Telephone	(415) 289-1056

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 of 4 forms are submitted.

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